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FOR INSTRUCTIONS, SEE BACK OF FORM COAS	ETHICS AND	FORM	STATEMENT
CHECK ONE:	PE 1	DR-1	OF OF OF OR OTHER PROPERTY.
This is an initial* Statement of Organization	Reset Form	(Rev. 01/2006)	ORGANIZATION
This is an initial Statement of Organization This is an amended* Statement of Organization *An initial Statement of Organization must be filed within 10 days of the com	mittee's accepting contributions.	For Office Use (only 1767
— makina expenditures, or incumna indeptedness exceeding \$700. Amenam	ents must be tilea willlin 30 days of	Indexed	
a change. Penalties may be imposed for late-filed Statements of Organizati committee that exceeds \$750 in activity for another office shall file within 10	on. A candidate with an open davs either a new or amended	Audited Computer	8 4 WRS
DR-1 disclosing information concerning the campaign for the new office sought.			
COMMITTEE NAME ↓ ↓ (A candidate's committee must include the candidate's last name in the name of the committee.)			
Sanger for State Representative			
IMPORTANT: Indicate type of committee you are reporting for:			
(1)Statewide/Legislative/Judge Standing for Retention Candidate (2)Statewide PAC (3)State Party (4)County Central Committee (5)County Candidate (6)City Candidate (7)School Board or Other Political Subdivision Candidate (8)County PAC (9)City PAC			
(10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue(including committee involved in multiple city/county ballot issues)			
COMMITTEE TREASURER (mandatory for all committees)	COMMITTEE CHAIR (man	latory except for a	candidate's committee)
Name Leeta Sanger	Name ↓ ↓		
	Mailing Address ↓ ↓		
Mailing Addoth Street			
Stallast Center 17W2950063	City, State ↓ ↓ Zip Code ↓	ŀ	
545 490-4582			
Phone (515) 490-4582	Phone ()		
e-Mail Leetadc@wildblue.net	e-Mail		-/->
INDICATE PURPOSE OF COMMITTEE - Check One Box 2 Adv Comment or description:	ocate for/against candidate(s) L /	Advocate for ballot is: Advocate against ball	ot issue(s)
All Candidates Enter: Office Sought: State Representative	County/Local Candidates	and Local Ballot Co	ommittees Enter:
	County:		Ì
Political Party (if applicable) Republican	(If active in multiple ballot is:	sue elections, attach	list of counties
District: 62	Date of Election:		
Year Standing for Election: 2008			Y'(2001/2010)
Bank Account Name	Candidate name & Address or		
	↓ ↓ ↓	Affiliate, or Sponso	<u>C</u> 1
Sanger for State Representative	↓ ↓ Chris Sanger	Affiliate, or Sponso	<u>r</u>
	Chris Sanger	Affiliate, or Sponso	<u> </u>
	1 ' '	Affiliats, or Sponso	
Name of Financial Institution/type of Account ↓ ↓	Chris Sanger Mailing Address ↓ ↓	Affiliate, or Sponso	<u>Zip</u> ↓ ↓
Name of Financial Institution/type of Account ↓↓ Wells Fargo Bank/Checking	Chris Sanger Mailing Address ↓ ↓ 712 Leach Avenue City ↓ ↓ Des Moines		
Name of Financial Institution/type of Account ↓↓ Wells Fargo Bank/Checking Mailing Address ↓↓	Chris Sanger Mailing Address ↓ ↓ 712 Leach Avenue City ↓ ↓ Des Moines	State ↓ ↓	Zip ↓ ↓
Name of Financial Institution/type of Account ↓↓ Wells Fargo Bank/Checking Mailing Address ↓↓ 666 Walnut Street	Chris Sanger Mailing Address ↓ ↓ 712 Leach Avenue City ↓ ↓ Des Moines Phone (515) 229-7153 The lowa Entreprene	State ↓ ↓ Iowa	Zip ↓ ↓
Name of Financial Institution/type of Account ↓↓ Wells Fargo Bank/Checking Mailing Address ↓↓ 666 Walnut Street City ↓↓ State ↓↓ Zip ↓↓	Chris Sanger Mailing Address ↓ ↓ 712 Leach Avenue City ↓ ↓ Des Moines	State ↓ ↓ Iowa	Zip ↓ ↓
Name of Financial Institution/type of Account ↓↓ Wells Fargo Bank/Checking Mailing Address ↓ ↓ 666 Walnut Street City ↓ ↓ State ↓ ↓ Zip ↓ ↓ Des Moines lowa 50309	Chris Sanger Mailing Address ↓ ↓ 712 Leach Avenue City ↓ ↓ Des Moines Phone (515) 229-7153 e-Mail ThelowaEntreprene	State ↓ ↓ Iowa	Zip ↓ ↓
Name of Financial Institution/type of Account ↓↓ Wells Fargo Bank/Checking Mailing Address ↓↓ 666 Walnut Street City ↓↓ State ↓↓ Zip ↓↓ Des Moines lowa 50309 STATEMENT OF AFFIRMATION: By filing this document the committee aff	Chris Sanger Mailing Address ↓ ↓ 712 Leach Avenue City ↓ ↓ Des Moines Phone (515) e-Mail ThelowaEntreprene	State ↓ ↓ lowa eur@gmail.com	Zip ↓ ↓ 50315
Name of Financial Institution/type of Account Wells Fargo Bank/Checking Mailing Address 666 Walnut Street City State Tip Des Moines STATEMENT OF AFFIRMATION: By filing this document the committee aff	Chris Sanger Mailing Address ↓ ↓ 712 Leach Avenue City ↓ ↓ Des Moines Phone (515) e-Mail ThelowaEntreprene	State ↓ ↓ lowa eur@gmail.com	Zip ↓ ↓ 50315
Name of Financial Institution/type of Account Wells Fargo Bank/Checking Mailing Address 666 Walnut Street City State Iowa City State Tip Ti	Chris Sanger Mailing Address	State ↓ ↓ Iowa eur@gmail.com ode chapters 68A and	Zip ↓ ↓ 50315
Name of Financial Institution/type of Account Wells Fargo Bank/Checking Mailing Address 666 Walnut Street City State Tip Tip Des Moines STATEMENT OF AFFIRMATION: By filling this document the committee aff 1. The committee and all persons connected with the committee understand tha rules in Chapter 351 of the lowa Administrative Code. 2. That lowa Code section 68A.402 and rule 351—4.9 require the filing of disclosubjects the candidate or chairperson (in the case of committees other than a case.)	Chris Sanger Mailing Address	State ↓ ↓ Iowa eur@gmail.com ode chapters 68A and	Zip ↓ ↓ 50315
Name of Financial Institution/type of Account Wells Fargo Bank/Checking Mailing Address 666 Walnut Street City State Tip	Chris Sanger Mailing Address	State ↓ ↓ lowa eur@gmail.com ode chapters 68A and hese reports on or befassessment of a civil p	Zip ↓ ↓ 50315 68B and the administrative ore the required due dates penalty and the possible
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